

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SS</i>		<i>02/23/00</i>
O.I.P.E. CLASSIFIER		59	3300
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>MB</i>	70203	4-18

## INDEX OF CLAIMS

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 Canceled A ..... Appeal  
 Restricted 0 ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here